

<i>SERFF Tracking Number:</i>	<i>UHLC-125985171</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>United HealthCare Insurance Company</i>	<i>State Tracking Number:</i>	<i>41323</i>
<i>Company Tracking Number:</i>	<i>GU10067 AR (11/08)</i>		
<i>TOI:</i>	<i>MS05G Group Medicare Supplement - Standard Sub-TOI:</i>		<i>MS05G.001 Plan A</i>
	<i>Plans</i>		
<i>Product Name:</i>	<i>MEDICARE SELECT</i>		
<i>Project Name/Number:</i>	<i>Agent Sales Presentation/GU10067 AR (11/08)</i>		

## Filing at a Glance

Company: United HealthCare Insurance Company

Product Name: MEDICARE SELECT

SERFF Tr Num: UHLC-125985171 State: ArkansasLH

TOI: MS05G Group Medicare Supplement -  
Standard Plans

SERFF Status: Closed

State Tr Num: 41323

Sub-TOI: MS05G.001 Plan A

Co Tr Num: GU10067 AR (11/08)

State Status: Filed-Closed

Filing Type: Advertisement

Co Status:

Reviewer(s): Stephanie Fowler

Author: Bobbie Walton

Disposition Date: 01/21/2009

Date Submitted: 01/12/2009

Disposition Status: Filed

Implementation Date Requested: On Approval

Implementation Date:

State Filing Description:

## General Information

Project Name: Agent Sales Presentation

Status of Filing in Domicile: Not Filed

Project Number: GU10067 AR (11/08)

Date Approved in Domicile:

Requested Filing Mode: Review & Approval

Domicile Status Comments:

Explanation for Combination/Other:

Market Type: Group

Submission Type: New Submission

Group Market Size: Large

Overall Rate Impact:

Group Market Type: Association

Filing Status Changed: 01/21/2009

State Status Changed: 01/21/2009

Deemer Date:

Corresponding Filing Tracking Number:

Filing Description:

MEDICARE SUPPLEMENT ADVERTISING MATERIAL

## Company and Contact

### Filing Contact Information

Susan Cipollo, Director

Susan\_J\_Cipollo@uhc.com

SERFF Tracking Number: UHLC-125985171 State: Arkansas  
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Plans  
Product Name: MEDICARE SELECT  
Project Name/Number: Agent Sales Presentation/GU10067 AR (11/08)

601 Office Center Dr. (267) 470-1519 [Phone]  
Fort Washington, PA 19034 (267) 470-1906[FAX]

**Filing Company Information**

United HealthCare Insurance Company CoCode: 79413 State of Domicile: Connecticut  
450 Columbus Boulevard Group Code: 707 Company Type: Life and Health  
PO Box 150450  
Hartford, CT 06115-0450 Group Name: State ID Number:  
(215) 653-8046 ext. [Phone] FEIN Number: 36-2739571  
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Product Name: MEDICARE SELECT  
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## Filing Fees

Fee Required? Yes  
Fee Amount: \$25.00  
Retaliatory? No  
Fee Explanation: \$25.00 per component - 1 component = \$25.00  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
United HealthCare Insurance Company	\$25.00	01/12/2009	24957113



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TOI:	MS05G Group Medicare Supplement - Standard Plans	Sub-TOI:	MS05G.001 Plan A
Product Name:	MEDICARE SELECT		
Project Name/Number:	Agent Sales Presentation/GU10067 AR (11/08)		

## Disposition

Disposition Date: 01/21/2009

Implementation Date:

Status: Filed

Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number: UHLC-125985171 State: Arkansas  
Filing Company: United HealthCare Insurance Company State Tracking Number: 41323  
Company Tracking Number: GU10067 AR (11/08)  
TOI: MS05G Group Medicare Supplement - Standard Sub-TOI: MS05G.001 Plan A  
Plans  
Product Name: MEDICARE SELECT  
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Item Type	Item Name	Item Status	Public Access
Form	Agent Sales Presentation	Filed	Yes

SERFF Tracking Number: UHLC-125985171 State: Arkansas

Filing Company: United HealthCare Insurance Company State Tracking Number: 41323

Company Tracking Number: GU10067 AR (11/08)

TOI: MS05G Group Medicare Supplement - Standard Sub-TOI: MS05G.001 Plan A  
Plans

Product Name: MEDICARE SELECT

Project Name/Number: Agent Sales Presentation/GU10067 AR (11/08)

## Form Schedule

**Lead Form Number:** GU10067 AR (11/08)

Review Status	Form Number	Form Type	Form Name	Action	Action Specific Data	Readability	Attachment
Filed	GU10067 AR (11/08)	Advertising	Agent Sales Presentation	Initial		45	Med Supp PTT_12.22.08 _Arkansas.pdf

# AARP Medicare Supplement Insurance Plans

## Welcome!

My name is:



*Health*

**Medicare Supplement Insurance**

insured by **United HealthCare  
Insurance Company**



# Goals for Today



## Today, we will:

- Cover general information about Medicare and Medicare supplement insurance
- Talk about the unique relationship between AARP and UnitedHealthcare
- Discuss features of AARP Medicare Supplement plans for people on Medicare
- Explore which plan might be best for you
- Help you enroll if you're ready



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# What is Medicare?



## A Federal government health program

- Enacted by Congress in 1965
- Operated by the government and government subcontractors
- Pays a fee for your care directly to the doctors and hospitals you visit

## Eligibility:

- Individuals age 65 and over, or under age 65 and qualify on the basis of disability or other special situation
- U.S. citizens or legal residents who have lived in the U.S. for at least 5 consecutive years



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# What Medicare Covers



## Medicare may cover a portion of the following costs:

### Part A: Hospital Insurance helps to cover:

- Inpatient hospital care
- Inpatient mental health care
- Skilled nursing facility care
- Home health care
- Hospice care
- Inpatient blood

### Part B: Medical Insurance helps to cover:

- Physician services
- Outpatient hospital services
- Ambulance
- Outpatient mental health
- Outpatient blood
- Durable medical equipment (wheelchairs, oxygen, etc.)\*
- Outpatient physical, occupational and speech-language therapy

*\*(services and supplies must be medically necessary)*



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# Part A: Hospital and Skilled Nursing Insurance



Service	Medicare Pays	Your Cost Share 2009
Hospitalization deductibles	Days 1-60 All but \$1,068	<b>\$1,068</b>
	Days 61-90 All but \$267 per day	<b>\$267 per day</b>
	Days 91-150 (Lifetime Reserve Days) All but \$534 per day	<b>\$534 per day</b>
	Nothing beyond 150 days <i>After using Lifetime Reserve Days</i>	All costs for the remainder of the hospital stay
	First 3 pints of blood	100%
Skilled Nursing Facility Care	Days 1-20 100% of approved amount	Nothing
	Days 21-100 All but \$133.50 per day	<b>\$133.50 per day</b>
	Days 100+ No benefit	All costs for the rest of your stay

A Medicare Supplement Plan can help cover some or all of these costs.



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# Part B: Medical Insurance



Service	Medicare Pays	Your Cost Share 2009
Medical Expenses	80% of approved amount	<b>\$135 deductible per calendar year</b>
Doctors Fees		<b>20% of approved amount</b>
Outpatient		
Hospital Expenses		

A Medicare Supplement Plan can help cover some or all of these costs.

*You must continue to pay your Medicare Part B Premium.*



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## What's Not Covered?



- Medicare was not designed to cover everything
- With Medicare Parts A and B, deductibles and co-insurance charges must be paid out of your own pocket
- Original Medicare does not offer coverage for prescription drugs in most cases
  - Medicare prescription drug coverage is available with a Medicare Prescription Drug Plan (Part D)

With a Medicare Supplement plan, you can cover some or all of the costs not covered by Original Medicare, year after year.



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# What is a Medicare Supplement Plan?



- Private health insurance specifically designed to supplement Original Medicare
- Plans are standardized and the benefit levels vary by plan
- Helps pay some of the health care costs Medicare doesn't cover, like co-insurance, co-payments and deductibles
- Offers freedom to go to any hospital or physician that accepts Medicare
- Managed in accordance with Federal and state laws



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# Who is eligible to buy a Medicare Supplement Plan?



## As an applicant, you must:

- Be enrolled in Medicare Parts A and B at the time of the plan effective date\*
- Be a resident of the state in which you are applying for coverage

*\* Note: AARP Medicare Supplement Insurance Plans may not be available to Medicare beneficiaries under age 65 in some states.*



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# Why Choose a Medicare Supplement Plan?



- Help with managing out-of-pocket costs
- Freedom to choose any doctor that accepts Medicare
- Virtually no claim forms to file
- Portable coverage that goes with you when you move or travel.
- Foreign travel coverage for emergency services (with many plans)
- Guaranteed renewable
- A 30-day “free look” evaluation period



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# Medicare Supplement Plans



Medicare Supplement Benefits	Medicare Supplement Plans A through L											
	A	B	C	D	E	F	G	H	I	J	K	L
Medicare Part A Co-insurance and Medicare Supplement Coverage for Hospital Benefit	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Medicare Part B Co-insurance or Co-payment	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	50%	75%
Blood (First 3 Pints)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	50%	75%
Hospice Care Co-insurance or Co-payment											50%	75%
Skilled Nursing Facility Care Co-insurance			✓	✓	✓	✓	✓	✓	✓	✓	50%	75%
Medicare Part A Deductible		✓	✓	✓	✓	✓	✓	✓	✓	✓	50%	75%
Medicare Part B Deductible			✓			✓				✓		
Medicare Part B Excess Charges						✓	80%		✓	✓		
Foreign Travel Emergency (Up to Plan Limits)*			✓	✓	✓	✓	✓	✓	✓	✓		
At-Home Recovery (Up to Plan Limits)				✓			✓		✓	✓		
Preventive Care Co-insurance (Included in the Part B Co-insurance)	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
Preventive Care not Covered by Medicare (up to \$120)					✓				✓			
2009 out-of-pocket limit											\$4,620**	\$2,310**

\* You must also pay a separate deductible for foreign travel emergency (\$250 per year).

\*\* After you meet your out-of-pocket yearly limit and your yearly Part B deductible (\$135 in 2009), the plan pays 100% of covered services for the rest of the calendar year.

# How Does it Work?



**Example: Roger has recently been hospitalized for several days and was released to skilled nursing care for 22 days. He also had a few follow-up doctor appointments. Let's look at what his out-of-pocket expenses could look like:**

Description of Service	Medicare Only	Medicare and Supplement Plan F
Part A deductible for hospital stay	\$1,068	\$0
Part A co-insurance for 2 days in a skilled nursing facility (\$133.50/day) <i>Days 1-20 are covered by Medicare</i>	\$267	\$0
Part B deductible <i>(assumes Roger has not satisfied his Part B deductible for the year)</i>	\$135	\$0
Part B co-insurance for two doctor's visits <i>(20% of the Medicare-approved amount)</i>	\$32	\$0
Part B excess charges for same two doctor's visits <i>(costs equaling 15% above the Medicare-approved amount)</i>	\$28	\$0
<b>Total Roger would pay for this medical event</b>	<b>\$1,526</b>	<b>\$0</b>



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**AARP Supplement Insurance Plans B through J cover the \$1,068 Medicare Part A deductible. Plans C, F & J cover the \$135 Medicare Part B deductible.**

# Why an AARP® Medicare Supplement?



- Medicare supplement plans that carry the AARP name
- Competitive pricing
- You can't be singled out for a rate increase
- Trusted by more than 2.7 million seniors
- Backed by the experience and expertise of UnitedHealthcare
- Value-added services
- Knowledgeable Customer Service Representatives to assist you
- Medicare supplement plans available in all states and territories.



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You or a member of your household must be an AARP Member, but you can join at the time of your enrollment.

# AARP and United Healthcare



## AARP

- Identifies companies that share a common mission: to make affordable, quality health care coverage available for Americans as they age
- Does not make recommendations for consumers
- The quality of the products that carry the AARP name – including this product from UnitedHealthcare Medicare Solutions – is monitored by:
  - Screening calls and establishing service level requirements
  - Secret shopper programs
  - Reviewing and editing marketing materials

## United Healthcare

- Offers products and services that provide real value, and most importantly, meet the needs of individuals eligible for Medicare
- Products are sold responsibly and supported by outstanding customer service



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# AARP Medicare Supplement Plan Information



## Arkansas Highlights:

- AARP Medicare Supplement Insurance Plans A through L are available in Arkansas for beneficiaries age 65 and older
- AARP Medicare Select Plan C is also available in certain areas of the state
- Plans are competitively priced
- Discounts available: Multi-insured discounts, EFT discounts
- Value added services, including SilverSneakers® fitness program, available at no additional cost to you
- Coverage for eligible Medicare beneficiaries age 50-64 is also available in Arkansas



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# Arkansas Standardized Monthly Plan Rates



## 2009 Standardized Monthly Plan Rates (Age 65 and older)

A	B	C	Select C	D	E	F	G	H	I	J	K	L
Guaranteed Annual Savings (Base)												
\$118.25	\$162.50	\$187.75	\$127.25	\$174.25	\$175.00	\$188.75	\$175.50	\$182.75	\$183.75	\$193.50	\$91.25	\$130.50



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# Value-Added Services



- **24-hour Nurse HealthLine** – Get expert answers to your health questions from a registered nurse
- **Vision discounts** – Save on eye exams, eyeglasses and contact lenses
- **Pharmacy savings** – Get discounts on your prescription drugs
- **SilverSneakers® Program** – Get a free gym membership at participating locations



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# What's Next?



## Let's meet and....

- ✓ Discuss your options
- ✓ Determine which plan is right for you
- ✓ Complete and submit your application



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# Enrollment Materials



## AARP® Medicare Supplement Enrollment Material

**AARP** Health  
Medicare Supplement Insurance  
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### APPLICATION FORM AARP Medicare Supplement Insurance Plans

Underwritten by United HealthCare Insurance Company, First Washington, PA 10054

AARP Membership Number (If you are already a member)

First Name MI Last Name  
Address Line 1  
Address Line 2  
City ST Zip

#### Instructions

- Complete all the sections of this form.
  - Please print in all CAPITAL LETTERS.
  - Check must be dated with Black or Blue INK, as shown below.
- EXAMPLE:  
Gender ☐ M ☐ F
- If not an AARP member, please be sure to include your AARP Membership Application and a check or money order for your \$12.50 annual AARP Membership dues.
  - If return envelope is lost or misplaced, please mail to: AARP Health, United HealthCare Enrollment Division, P.O. Box 105331, Atlanta, GA 30348-5331

#### US ABOUT YOURSELF

Please fill in the following information as found on your Medicare ID Card

NAME \_\_\_\_\_  
MEDICARE CLAIM # \_\_\_\_\_  
HOSPITAL (PART A) EFFECTIVE DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MEDICAL (PART B) EFFECTIVE DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_  
ARE BOTH MEDICARE PARTS A & B COVERAGE ACTIVE? ☐ YES ☐ NO

Please fill in the following information as found on your Medicare ID Card

NAME \_\_\_\_\_  
MEDICARE CLAIM # \_\_\_\_\_  
HOSPITAL (PART A) EFFECTIVE DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MEDICAL (PART B) EFFECTIVE DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_  
ARE BOTH MEDICARE PARTS A & B COVERAGE ACTIVE? ☐ YES ☐ NO

Please fill in the following information as found on your Medicare ID Card

NAME \_\_\_\_\_  
MEDICARE CLAIM # \_\_\_\_\_  
HOSPITAL (PART A) EFFECTIVE DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_  
MEDICAL (PART B) EFFECTIVE DATE: \_\_\_\_/\_\_\_\_/\_\_\_\_  
ARE BOTH MEDICARE PARTS A & B COVERAGE ACTIVE? ☐ YES ☐ NO

CONTINUE ON NEXT PAGE

### Pay with Electronic Funds Transfer (EFT) The Easiest Way to Pay!

Members nationwide are enjoying the benefits of Electronic Funds Transfer (EFT) payment with automatic checks deducted from your checking or savings account. That's up to \$24.00 a year! In addition:  
• No cost of checks and rising postal rates.  
• No time to write a check each month.  
• No worry about mailing a payment if you travel or become ill, because payments are deducted on or about the fifth day of each month.

Here's How to Sign Up:  
1. Complete the Authorization Form below. Return it in the envelope enclosed.  
2. Include a voided check from the account you want your payments withdrawn from.  
3. We will notify you approximately two months for the service to begin. We will notify you of your EFT start date. Until then, continue to use your monthly check payments.

Do not send a deposit slip or canceled check with your EFT start date. Until then, continue to use your monthly check payments.

I (we) authorize United HealthCare Insurance Company of New York for New York HealthCare Options to initiate monthly direct-current monthly rate, from the named banking facility (BANK) account.

Name(s): \_\_\_\_\_  
Bank Name: \_\_\_\_\_  
Bank Routing No.: \_\_\_\_\_  
Account Type: \_\_\_\_\_  
The reverse side of this form contains the reverse side of this form. Please do not detach this form.

Authorization Form

LA19458 (10/07)

**AARP** Health  
Medicare Supplement Insurance  
insured by United HealthCare Insurance Company

Dear Prospective Member,  
Thank you for taking the time to learn more about the AARP Medicare Supplement Insurance Plans. While your Sales Representative has already talked to you about the AARP Medicare Supplement Insurance, it can be a lot to think about in such a short period of time. As you take some more time to review this material, you may want to pay special attention to the following:  
• **Outline of Medicare Supplement Coverage** – This includes an overview of the plans and the benefits covered under the plan. It will also help you identify the benefits most important to you and help you choose the plan that best fits your individual needs. For a more detailed description of the benefits, look for the plan of your choice toward the end of the booklet.  
• **Cover Page – Rates** – This page shows the rates for each of the plans described on the Outline of Medicare Supplement Coverage.  
• **Your Guide** – This contains detailed information about the Medicare supplement plans available to you through AARP Health.

If you haven't already applied to enroll in a plan, simply choose the AARP Medicare Supplement coverage that's right for you and best meets your needs. Your Sales Representative can help you complete and submit the Application Form. Remember to include the first month's premium and, if you are not already an AARP member, please remember to include your completed AARP Membership Application and a check for the \$12.50 annual membership fee.  
If you have any questions, call toll-free: 1-866-387-7550 any weekday from 7 a.m. to 11 p.m. and Saturdays from 9 a.m. to 5 p.m., Eastern Time.  
We look forward to answering your questions. Please feel free to call.

Sincerely,  
Jay Fleming, Licensed Agent  
Member Services  
AARP Health

Important disclosure on back

# What to Expect When You Join



- A letter informing you that your enrollment is being processed
- Your member identification card when your enrollment is approved
- A post-enrollment kit including your policy and coverage details
- Ongoing education about how to make the most of your health plan benefits
- Periodic health and wellness communications
- Courteous Customer Service representatives to help answer your questions



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# Questions & Answers



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# Referrals



- Family, friends and neighbors
- Organizations, groups and clubs to which you belong
- Local church or religious organizations
- Senior housing and community centers

*“Referrals from family & friends are the greatest compliment I can receive...”*



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# Thank You!



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# Additional Information



These plans carry the AARP name and United HealthCare Insurance Company pays a fee to AARP and its affiliate for use of the AARP trademark and other services. Amounts paid are used for the general purposes of AARP and its members.

AARP Health is a collection of health-related products, services, and insurance programs available through AARP. Neither AARP nor its affiliate is the insurer. AARP contracts with insurers to make coverage available to AARP members.

AARP Medicare Supplement Insurance Plans are insured by United Healthcare Insurance Company, Fort Washington, PA (United HealthCare Insurance Company of New York, Islandia, NY, for New York residents). **Not connected with or endorsed by the U.S. Government or the federal Medicare program.** Policy Form No. GRP 79171 GPS-1 (G-36000-4). In some states, plans may be available to persons eligible for Medicare by reason of disability. **This is a solicitation of insurance. An agent may contact you.** Call to receive complete information, including benefits, costs, eligibility requirements, exclusions, and limitations.

AARP does not make health plan recommendations for individuals. You are strongly encouraged to evaluate your needs before choosing a health plan.

AARP and its affiliate are not insurance agencies or carriers and do not employ or endorse insurance agents, brokers, representatives or advisors.



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## **Rate Information**

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